

ARIZONA STATE BOARD OF HEALTH

BUREAU OF VITAL STATISTICS
STANDARD CERTIFICATE OF BIRTHState File No. 89

Registered No. _____

1. PLACE OF BIRTH

County Gila State Arizona
District or Township _____ or Village Christmas
City _____ No. _____ St. _____ Ward _____
(If birth occurred in a hospital or institution, give its NAME instead of street and number)

2. Full name of child

Dorothy June Goodwin

{ If child is not yet named, make supplemental report, as directed.

3. Sex of Child

femaleTo be answered ONLY
in event of plural
births.

4. Twin, triplet or other

5. No., in order of birth _____

6. Legitimate?

yes

7. Date

of birth 6-1-1926

Month Day Year

8.

FATHER

Full name

Edward Geo. Goodwin

9. Residence

(Usual place of abode)

Christmas

If non-resident, give place and state.

10. Color or race

white11. Age at last birthday 26 (Years)

12. Birthplace (city or place)

Paducah Ky.

(State or country)

13. Occupation

Nature of industry

Pipe fitter
mipping

14.

MOTHER

Full maiden name

Hazel Mary Wilson

15. Residence

(Usual place of abode)

Christmas

If non-resident, give place and state.

16. Color or race

white17. Age at last birthday 19 (Years)

18. Birthplace (city or place)

Silver City N. Mex.

(State or country)

19. Occupation

Nature of industry

House Wife

20. Number of children of this mother

one(Taken as of time of birth of child herein
certified and including this child.)

(a) Born alive and now living

1

(b) Born alive but now dead

0

(c) Stillborn

021. Were precautions taken against oph-
thalmia neonatorum?Yes

CERTIFICATE OF ATTENDING PHYSICIAN OR MIDWIFE

I hereby certify that I attended the birth of this child, who was

(Born alive and now living)at 8:00 A.M. on the date above stated

Signature

Charles F. Hurst M.D.{ *When there was no attending physician
or midwife, then the father, householder,
etc., should make this return. A stillborn
child is one that neither breathes nor
shows other evidence of life after birth.

Given name added from

a supplemental report

Month, day, year

Address

Hayden Arizona

Filed

July 8 1926

(Physician or midwife)

C. F. Hurst

Registrar

Registrar

475-601-865